



**Ministry of Health and
Long-Term Care**

**Ministère de la Santé et des Soins
de longue durée**

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**Rapport d'inspection prévue
sous la Loi de 2007 sur les foyers
de soins de longue durée**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
May 24, Jun 7, 2019	2019_539120_0018	008963-19	Critical Incident System

Licensee/Titulaire de permis

Revera Long Term Care Inc.
5015 Spectrum Way, Suite 600 MISSISSAUGA ON L4W 0E4

Long-Term Care Home/Foyer de soins de longue durée

Dover Cliffs
501 St. George Street P.O. BOX 430 Port Dover ON N0A 1N0

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

BERNADETTE SUSNIK (120)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): May 9, 14, 2019 (off site)

A critical incident report was submitted to the MOHLTC in April 2019, regarding door security.

During the course of the inspection, the inspector(s) spoke with the Associate Director of Care and the maintenance manager via telephone.

No on site inspection was conducted based on the details provided by the home's management staff.

**The following Inspection Protocols were used during this inspection:
Safe and Secure Home**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Légende
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).	Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 9. Doors in a home



Specifically failed to comply with the following:

s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,
i. kept closed and locked,
ii. equipped with a door access control system that is kept on at all times, and
iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,

A. is connected to the resident-staff communication and response system, or
B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).

3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.

4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).

Findings/Faits saillants :



1. The licensee failed to ensure that all doors leading to stairways and to the outside of the home were kept locked and that the doors were equipped with a door access control system that was kept on at all times.

A critical incident report was submitted to the MOHLTC in April 2019, identifying that resident #101 exited the building without staff knowledge via a stairwell door. The licensee was alerted that the doors in the home were unlocked by another resident who witnessed resident #101 leaving. The resident was found outside on the premises with a minor injury 13 minutes after exiting the building.

On May 9, 2019, the maintenance manager was contacted and confirmed that the stairwell doors and the main front entrance doors were equipped with a door access control system comprised of magnetic locks, which relied on electricity. In order for the doors to stay locked, a supply of energy was required until disconnected by a person using a key pad and code or by fire alarm.

The maintenance manager reported that a power interruption that lasted less than 10 seconds occurred on a specified date in April 2019, which caused the door access control system to become unlocked. The interruption was too short to allow the generator to take over the supply of power to the magnetic locks on all of the doors leading to stairwells and to the main front doors. A period of approximately 10 minutes followed whereby staff were notified and the door access control system re-set. Resident #101 was able to push open a stairwell door during the same 10 minute time frame the doors remained unlocked. On May 14, 2019, the maintenance manager confirmed that the magnetic locks were not connected to a back-up battery system. Discussion was held regarding the importance of a back-up power supply for the magnetic locks for short power interruptions or for times when the generator fails to ensure that the magnetic locks, or the door access control system is kept on at all times.

The licensee failed to ensure that all doors leading to stairways and to the outside of the home were kept locked and that the doors were equipped with a door access control system that was kept on at all times. [s. 9. (1)]



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Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that all doors leading to stairways and to the outside of the home are kept locked and that the doors are equipped with a door access control system that is kept on at all times, to be implemented voluntarily.

Issued on this 4th day of June, 2019

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Original report signed by the inspector.